

ATTORNEY/DOCKET No:

DECLARATION FOR PATENT APPLICATION AND APPOINTMENT OF ATTORNEY

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name; I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention (Design, if applicable) entitled:

the specification of which (check one):

☒ is attached hereto; or ☐ was filed on:

as U.S. Application Number or PCT International Application Number;

and (if applicable) was amended on:

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in *Title 37, Code of Federal Regulations, §1.56*. I hereby claim foreign priority benefits under *Title 35, United States Code §119* of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

PRIOR FOREIGN APPLICATION(S)			PRIORITY CLAIMED	
Number	Country	Day/Month/Year Filed	Yes	No

☐ Additional Priority Application(s) Listed on Following Page(s)

I HEREBY CLAIM THE BENEFIT UNDER TITLE 35 U.S. CODE § 119(E) OF ANY U.S. PROVISIONAL APPLICATIONS LISTED BELOW.	
Application Number	Day/Month/Year Filed

☐ Additional Provisional Application(s) Listed on Following Page(s)

I hereby claim the benefit under *Title 35, United States Code, §120* of any United States application(s) or PCT international application(s) designating The United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of *Title 35, United States Code, §112*, I acknowledge the duty to disclose information which is material to patentability as defined in *Title 37, Code of Federal Regulations, §1.56* which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

Application Number	Filing Date	Status - Patented, Pending or Abandoned

☐ Additional US/PCT Priority Application(s) listed on Following Page(s)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under *Section 1001 of Title 18 of the United States Code* and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: I (We) hereby appoint as my (our) attorneys, with full powers of substitution and revocation, to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Bruce H. Troxell. Reg. No. 26,592

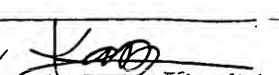
I (we) authorize my (our) attorneys to accept and follow instructions from _____ regarding any matter related to the preparation, examination, grant and maintenance of this application, any continuation, continuation-in-part or divisional based thereon, and any patent resulting therefrom, until I (we) or my (our) assigns withdraw this authorization in writing.

SEND CORRESPONDENCE TO:

TROXELL LAW OFFICE PLLC
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FULL NAME OF FIRST OR SOLE INVENTOR Han-Chin KAO		CITIZENSHIP
RESIDENCE ADDRESS 12F-3, #130 Chi Ho Rd., Taipei, Taiwan R.O.C.		POST OFFICE ADDRESS IS THE SAME AS RESIDENCE ADDRESS UNLESS OTHERWISE SHOWN BELOW
DATE January 5, 2004	SIGNATURE 	

☐ See following page(s) for additional joint inventors.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) & 1.27(c))—INDEPENDENT INVENTOR****Docket Number (Optional)**

Applicant, Patentee, or Identifier: _____

Application or Patent No.: _____

Filed or Issued: _____

Title: Apparatus for testing skin moisture

As a below named inventor, I hereby state that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in:

- ☐ the specification filed herewith with title as listed above.
☐ the application identified above.
☐ the patent identified above.

I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 35 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☐ No such person, concern, or organization exists.
☐ each such person, concern, or organization is listed below.

Separate statements are required from each named person, concern, or organization having rights to the invention stating their status as small entities (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37. CFR 1.28(b))

KAO, Han-Chin

NAME OF INVENTOR

NAME OF INVENTOR

NAME OF INVENTOR

SIGNATURE OF INVENTOR

SIGNATURE OF INVENTOR

SIGNATURE OF INVENTOR

January 5, 2004

DATE

DATE

DATE

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20232. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231